



RUNAWAY PREVENTION PLAN

Purpose: Use this form to develop a collaborative plan with the child/youth, caregiver, and caseworker to aid in the prevention of runaway occurrences for an individual child/youth who is at a higher risk of running away as indicated by: a history of running away, recent threats to run away, human trafficking victimization history, or any behaviors or circumstances that led the caseworker or provider to think the child/youth is at risk of running away. A runaway incident is defined as a type of unauthorized absence where child/youth left placement on their own accord, without permission from their caregiver, the caregiver has no reason to believe the child/youth will return, and the caregiver is unable to locate. It is important to engage the child/youth and their caregiver in the development of this plan to be successful.

Directions: All designated fields below must be completed. The child/youth and caregiver must receive a copy of this document, and a copy of this plan must be maintained in the case file. This plan should be evaluated monthly to ensure updates are made or if the plan should be continued.

Contracted Placements: Contract providers may use this form to fulfill contract requirements regarding runaway prevention within 48 hours of learning the child/youth is exhibiting behavior that warrants the use of a runaway prevention plan.

Non-Contracted Placements (such as kinship, FAD, own home, or any other non-contracted placement): Caseworkers must complete this form within 2 business days of learning the child/youth is exhibiting behavior that warrants the use of a runaway prevention plan.

CHILD'S INFORMATION				
Child's Name:	Date of Birth:	PID		
Caregiver Name:	Current Address:	City:	State:	Zip Code:



RUN RISK LEVEL

Runaway History (check all that apply):

- Never
- In last month
- In last 3 months
- In last 6 months
- In last year
- Prior to 1 year ago

Is youth 14 or older?

- Yes No

Human Trafficking Victimization History?

- Yes No

Frequent Runaway (multiple times a month)?

- Yes No

History of running away for long periods of time (more than 7 days)?

- Yes No

Other (explain):

PLAN PARTICIPATION

Person Completing the Form:

Date Completed:

Participated in Prevention Plan (check all that apply):

- Youth
- Caregiver
- CPI Caseworker
- CPS/SSCC Caseworker
- Parent
- Case Manager
- Residential Staff
- Other:



PLAN AND STRATEGIES

What are you good at? What do you think of when you think of your strengths?

When you have feelings of running away or you have runaway in the past, have you noticed any triggers or behaviors that made you feel this way? (Discuss examples: feeling anxious or trapped, feeling provoked by adults or peers, not knowing what to do, feeling overwhelmed, etc.)

In the past, what has helped or would have helped stop you from running away? (list examples: taking a walk, talking to a friend, talking to caseworker, listening to music, etc.) Who can you talk to if you are feeling like running away?

Discuss any developed coping mechanisms for the youth that will be implemented and document these here. (Ex. If agitated and need to be alone can go lay in bed for 15 minutes, listen to music on MP3 player, play basketball in the driveway, etc.)



If you are gone more than _____ (amount of time), your caregiver will report you as a runaway. Is there a safe place you can go and wait for the caregiver to pick you up within _____ (amount of time) of you running away? (Ex. If you need to go for a walk to calm down, you can walk the block and come right back or sit on the front porch.)

What are some of the dangers you could face if you run away?

Do you have the phone numbers for your caseworker, attorney or other child advocate, caregiver, relatives? If you left your placement and found yourself in an unsafe situation, who could you call?

What are some ways that your caregiver and I can provide you support to stop running away?



What are the specific actions to be taken by the participants to prevent another runaway episode (example: caseworker will return phone calls or texts from child same or next business day; caseworker will arrange contact with friends, relatives, or other supports to prevent child from running away; and, what, if any, tools will be provided to the youth to help them be successful). Document plan below:

List the name of at least three trusted adults below, their role in the youth's life, their phone number, and/or email address that you can call if you need support to prevent running away, or if you need help because you have already run away.

SIGNATURES

Youth: X	Date Signed:
Caregiver: X	Date Signed:
Caseworker: X	Date Signed:
Case Manager: X	Date Signed:
Residential Staff: X	Date Signed:
Other: X	Date Signed: